

Provider Inspection Summary
For the period 06/01/2003 to 05/31/2006
Community Based Residential Facility
CLASS AA (AMBULATORY)

Facility Information

Facility Name: PORTAGE HOUSE (610004)
Address: 1019 ARLINGTON PLACE, STEVENS POINT, WI 54481
License Status: REGULAR
Licensed/Certified/Registered 03/31/1981
Regional Office: NORTHERN REGION (RHINELANDER), (715) 365-2800

Survey History

Survey ID: 0095373 **End Date:** 08/12/2005 **Type:** ABBREVIATED **Purpose:** SURVEY

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0090745 **End Date:** 06/18/2003 **Type:** STANDARD **Purpose:** SURVEY

Results: STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #10005199 Served 08/07/2003

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
83.35(5)(d)	ACCURATE THERMOMETER INSIDE UNIT	07/26/2005	Yes
83.42(3)(e)	QUARTERLY FIRE DRILLS	07/26/2005	Yes
83.42(3)(f)	SLEEPING HOURS EVACUATION DRILL	07/26/2005	Yes
83.53(5)	EXIT LIGHTING	07/26/2005	Yes

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